

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL ROOM

2006 OCT 12 A 9 32

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

North Dakota Medical Association Political
Action Committee

ADDRESS (number and street)

PO Box 1198

☐ Check if different
than previously
reported. (ACC)

Bismarck

ND

58502-1198

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00003061

3. IS THIS
REPORT

☒

NEW
(N)

OR

☐

AMENDED
(A)

4. TYPE OF REPORT
(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☒ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

10/10/2006

in the
State of

ND

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

10/10/2006

in the
State of

ND

5. Covering Period

07/01/2006

through

09/30/2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Strinden

Signature of Treasurer

Thomas Strinden

Date

10/10/2006

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

North Dakota Medical Association Political Action Committee

Report Covering the Period:

From:

07 01 2006

To:

09 30 2006

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1, 2006

4681.78

(b) Cash on Hand at
Beginning of Reporting Period.....

8054.73

(c) Total Receipts (from Line 19)

2380.56

9265.51

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

10435.29

13947.29

7. Total Disbursements (from Line 31)

2615.00

6127.00

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

7820.29

7820.29

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule D)



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

of Receipts

Page 3

North Dakota Medical Association Political Action Committee

07 01 2006

09 30 2006

COLUMN B
Calendar Year-to-Date

- (subtract Line 18(c) from Line 19).....▶

230000

9150.00

230000

9.150.00

23.00.00

9-150-00

8056

41551

238056

926551

238056

926551

FE6AN028

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	15.00	27.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15.00	27.00
22. Transfers to Affiliated/Other Party Committees.....	1,150.00	4,250.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,250.00	1,250.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements	200.00	600.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2,615.00	6,127.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2,615.00	6,127.00

DETAILED SUMMARY PAGE of Disbursements

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Page 5

III. Net Contributions/Operating Ex- **penditures**

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))▶
- 37. Offsets to Operating Expenditures
(from Line 15, page 3).....
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)▶

2300.00
15.00
15.00

9150.00
27.00
27.00

26039203839

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

☐ 21b ☒ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

North Dakota Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Committee on Medical Political Action

Mailing Address

1101 Vermont Ave NW

City

Washington

State

DC

Zip Code

20005

Purpose of Disbursement

Transfer

Candidate Name

008
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

07 31 2006

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

B. American Committee on Medical Political Action

Mailing Address

1101 Vermont Ave NW

City

Washington

State

DC

Zip Code

20005

Purpose of Disbursement

Transfer

Candidate Name

008
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

08 29 2006

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. American Committee on Medical Political Action

Mailing Address

1101 Vermont Ave NW

City

Washington

State

DC

Zip Code

20005

Purpose of Disbursement

Transfer

Candidate Name

008
Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

09 29 2006

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1150.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 1

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

North Dakota Medical Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. North Dakota Republican Party

Mailing Address

PO Box 3024

City

Fargo

State

ND

Zip Code

58108-3024

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

General Contribution

Date of Disbursement

09 / 07 / 2006

Amount of Each Disbursement this Period

1,000.00

B. Democratic NPL House Caucus

Mailing Address

1210 7th Ave NE

City

Jamestown

State

ND

Zip Code

58401

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☒ Other (specify) ▼

State:

District:

General Contribution

Date of Disbursement

08 / 14 / 2006

Amount of Each Disbursement this Period

250.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1,250.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked

☐ USPS Registered/Certified Postmarked (R/C)

☐ USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark

☒ Overnight Delivery Service (Specify): *Fed Ex* Shipping Date *10/11/06*
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked

SN
PREPARER
(3/2005)

10/12/06
DATE PREPARED

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